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MODIFIED PTO/SB/05 (03-01)

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>	<b>Attorney Docket No.</b> 006401.00417	
	<b>First Inventor</b>	Wang
	<b>Title</b> Cold-Water Soluble Extruded Starch Product	
	<b>Express Mail Label No.</b> EL 960970554 US	

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>  1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form</b> (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>  2. <input type="checkbox"/> <b>Applicant claims small entity status.</b> See 37 CFR 1.27.  3. <input checked="" type="checkbox"/> <b>Specification</b> [Total Pages <span style="border: 1px solid black; padding: 0 5px;">30</span> ] <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings ( if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  4. <input type="checkbox"/> <b>Drawing(s)</b> (35 U.S.C. 113) [Total Sheets <span style="border: 1px solid black; padding: 0 5px;">  </span> ] a. <input type="checkbox"/> Formal; or b. <input type="checkbox"/> Informal  5. <input type="checkbox"/> <b>Oath or Declaration</b> [Total Pages <span style="border: 1px solid black; padding: 0 5px;">9</span> ] a. <input type="checkbox"/> Newly executed (original or copy); or b. <input checked="" type="checkbox"/> <b>Copy from a prior application</b> (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  6. <input type="checkbox"/> <b>Application Data Sheet.</b> See 37 CFR 1.76	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231  7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> ) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies  <b>ACCOMPANYING APPLICATIONS PARTS</b>  9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Appointment of Associate Attorney or Agent
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18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation    ☒ Divisional    ☐ Continuation-in-part (CIP)

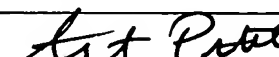
of prior application No: 09 / 863,928

Prior application information: Examiner Fontaine

Group / Art Unit: 1732

For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>17. CORRESPONDENCE ADDRESS</b>					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		22908		or <input type="checkbox"/> Correspondence address below	
		<i>(Insert Customer No. or Attach bar code label here)</i>			
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<b>Name (Print/Type)</b>	Aseet Patel	<b>Registration No. (Attorney/Agent)</b>	53,874
<b>Signature</b>		<b>Date</b>	October 15, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

16235 U.S. PTO  
10/687471

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="margin: 5px 0 0 20px;"><i>Patent fees are subject to annual revision.</i></p>		<p><b>Complete if Known</b></p>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	Unassigned
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 770		Filing Date	October 15, 2003
		First Named Inventor	Wang
		Examiner Name	Unassigned
		Art Unit	Unassigned
		Attorney Docket No.	006401.00417

<p><b>METHOD OF PAYMENT (check all that apply)</b></p> <p> <input type="checkbox"/> Check    <input type="checkbox"/> Credit card    <input type="checkbox"/> Money    <input type="checkbox"/> Other    <input type="checkbox"/> None Order                 </p> <p><input checked="" type="checkbox"/> Deposit Account:</p> <div style="margin-top: 10px;">                     Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">19-0733</span> </div> <div style="margin-top: 10px;">                     Deposit Account Name: <span style="border: 1px solid black; padding: 2px 50px;">Banner &amp; Witcoff, Ltd.</span> </div> <p><b>The Commissioner is authorized to: (check all that apply)</b></p> <p> <input checked="" type="checkbox"/> Charge fee(s) indicated below    <input checked="" type="checkbox"/> Credit any overpayments  <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application  <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.                 </p>				<p><b>FEE CALCULATION (continued)</b></p>																																																																																																																																																																																																																																															
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<p><b>2. EXTRA CLAIM FEES</b></p> <table style="width: 100%;"> <tr> <td>Total Claims</td> <td>3</td> <td>-20 **</td> <td>=</td> <td>0</td> <td>X</td> <td>Fee from below</td> <td>=</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td>1</td> <td>-3 **</td> <td>=</td> <td>0</td> <td>X</td> <td></td> <td>=</td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td>=</td> <td>0</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>84</td> <td>2201</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>280</td> <td>2203</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>84</td> <td>2204</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td><b>(\$ 0)</b></td> </tr> </tbody> </table> <p style="margin-top: 10px;">**or number previously paid, if greater; For Reissues, see above</p>						Total Claims	3	-20 **	=	0	X	Fee from below	=	0	Independent Claims	1	-3 **	=	0	X		=	0	Multiple Dependent					X		=	0	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	84	2201	42	Independent claims in excess of 3		1203	280	2203	140	Multiple dependent claim, if not paid		1204	84	2204	42	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		<b>SUBTOTAL (2)</b>					<b>(\$ 0)</b>																																																																																																																																																																					
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<p><b>SUBMITTED BY</b></p>				<p><b>Complete (if applicable)</b></p>	
Name (Print/Type)	Aseet Patel	Registration No. Attorney/Agent	53,874	Telephone	312-463-5000
Signature				Date	October 15, 2003

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Attorney Docket No. 006401.00417

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By: \_\_\_\_\_

Wang, U.S. Patent Application for "COLD-WATER SOLUBLE EXTRUDED STARCH PRODUCT"

- Transmittal (in duplicate)
- Fee Transmittal (in duplicate)
- Appointment of Associate Attorney or Agent (1 page)
- Executed Copy of Declarations (9 pages)
- Patent Application (30 pages)
- Preliminary Amendment (3 pages)
- Return Receipt Postcard